DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor. I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
<u>A</u> p	ostal sorting mach	ine including a bin-transfer structure						
the application of which is attached hereto	OR	PCT International Application Numb (Confirmation No.	nited States Applic per PCT/FR2004), and was amapplicable).	/050338				
I hereby state that I have reviewed ar amended by any amendment specifically	nd understand the copy referred to above.	contents of the above identified applications	ation, including	the claims, as				
I acknowledge the duty to disclose in continuation-in-part application(s), mat and the national or PCT international fil	erial information w	hich became available between the fili	in 37 CFR 1.56, ng date of the pri	including for or application				
I hereby claim foreign priority under 3: plant breeder's rights certificate(s), or 3 than the United States of America, listed patent, inventor's or plant breeder's right the application on which priority is claim	65(a) of any PCT in the self of the self o	nternational application(s) which design so identified below, by checking the box	nated at least one	country other				
Prior Application Number(s)	Country	Filing Date	Priority (Yes	Claimed No				
03 50563	France	17 September 2003	X					
I hereby claim benefit under 35 United S	States Code §119(e)	of any United States provisional applic	ation(s) listed bel	ow.				
Application Number(s)		Filing Date						
I hereby claim benefit under 35 United application(s) designating the United Statis not disclosed in a listed prior United Title 35, United States Code, §112, I application as defined in 37 C.F.R. 1.56 international filing date of this application	ates, listed below an States or PCT Inte acknowledge my do which occurred be	 id, insofar as the subject matter of each or rnational application in the manner pro- luty to disclose any information mater 	of the claims of the ovided by the first rial to the patents	nis application paragraph of				
Prior U.S. or International Application Num	ber(s)	U.S. or International Filing Date	State	us				
I hereby appoint all attorneys of SUG below as my attorneys to prosecute this connected therewith, recognizing that the at the sole discretion of Sughrue Mion address filed under the same USPTO Cu	application and to the specific attorneys per PLLC, and reque stomer Number.	transact all business in the United State listed under that Customer Number ma	es Patent and Trac	lemark Office				

I hereby declare that all statements made herein of my-own_knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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NAME OF SOLE OR FIRST IN	VENTOR:					
Given Name						
(first and middle [if any]) FORELLA		Family Nam	Family Name or Surname Guy			
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(this and iniquie [if any]) GILL	A.	Family Nam	e or Surname	François		
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Given Name (first and middle [if any])	1.00	Family Name	e or Surname			
Inventor's Signature				Date		
Residence: City	State	Country		Citizens	ship	
Mailing Address:	-			•		
City	State	Zip		Country	,	
NAME OF FOURTH INVENTO	PR:					
Given Name (first and middle [if any])		Family M.	0			
(first and finddle [if any])	,	Family Name	or Surname			
Inventor's Signature				Date		
Residence: City	State	Country		Citizens	hip	
Mailing Address:						
City	State	Zip		Country		
NAME OF FIFTH INVENTOR:		_				
Given Name (first and middle [if any])		Family Name	or Surname			
Inventor's Signature			Date			
Residence: City	State	Country		Citizens	hip	
Mailing Address:						
City	State	Zip		Country		
NAME OF SIXTH INVENTOR:				,		
Given Name (first and middle [if any])		Family Name	Family Name or Surname			
Inventor's Signature				Date	_	
						